### October 1997

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# 1 Clinical Center CONS

# Staff for new CC office announced

The Office of the Director recently announced the creation of the Office of Administrative Management and Planning (OAMP), designed to integrate and coordinate the administrative management support provided within the Clinical Center while providing a career ladder for CC administrative officers (AOs).

"Until recently there was limited growth potential for administrative officers in the Clinical Center," says Maureen Gormley, OAMP chief.

In the new office, four seniorlevel administrative officers will work with department AOs to coordinate administrative management services, which include personnel operations, acquisitions management, and budget.

The new senior administrative officers—Elaine Ayers, Bridget Macnamara, Lynda Ray, and William Rosano—will each receive primary departmental assignments. Linda Linko will continue to serve as the senior AO for nursing. The goal is a team able to create administrative efficiencies that will result in cost savings and service improvements in the CC, Gormley pointed out.

Among the first efforts of the OAMP is the installation of Visual Status of Funds software, an automated budget tracking and monitoring system that downloads information from the NIH Central Accounting System. Other efforts

See New office, back page



Prototype

The artist's rendering of the new Mark O. Hatfield Clinical Research Center features a sweep of new wings. The initial phase of construction, slated to begin at the end of October, includes the demolition of Building 20, several cottages, and approximately 200 trees. At press time, groundbreaking ceremonies had been scheduled for Oct. 31.

# CC leads local campaign train for annual CFC

All Aboard! The 1997 NIH Combined Federal Campaign (CFC), led this season by the Clinical Center, is leaving the station with a kickoff set for Thursday, Oct. 16, at 11:45 a.m. in front of Building 1.

Last year, the Clinical Center alone raised over \$89,000. "During this year's campaign we hope to collectively raise over \$1 million at NIH," says Walter Jones, NIH ICD coordinator.

NIH Deputy Director Dr. Ruth Kirschstein chairs the NIH effort. Anthony Itteilag, NIH deputy director for management, is the NIH coordinator. Dr. John Gallin, CC director, is the NIH vice chairman.

The 1997 theme, "It All Comes Back to You," is coupled with the train metaphor to symbolize the importance of all HHS employees "getting on board" to help others.

See CFC train, page five

### from the director

by Dr. John I. Gallin CC director

October promises to be a busy and historic month for the Clinical Center.

CC departments are working together and with the institutes to prepare for our accreditation survey by the Joint Commission on Accreditation of Healthcare Organizations, which is set for later this month.

This top-to-bottom scrutiny offers us all the opportunity to spotlight what we do best, which is to provide the highest quality patient care in a clinical research environment. The survey team will review our policies and procedures, visit patient-care units, and talk with employees representing all aspects of CC operations. I am confident that the hard work of all involved in the preparations will result in a successful survey.

As this issue of *CCNews* goes to press, groundbreaking ceremonies for our new Clinical Research Center (CRC) are scheduled for Oct. 31, the day after the Joint Commission survey ends. Senator Mark O. Hatfield, for whom our new facility will be named, will be on hand for this event.

I hope that as many Clinical Center employees as possible are able to participate. Details about the ceremony will be available soon.

The CRC design team is hard at work refining plans for our new facility. To ensure that the final design meets the needs of the NIH clinical research programs, the CC Advisory Council has coordinated a series of meetings to articulate the needs and visions of the individual institutes, centers, and divisions, which will be incorporated into the final plans.

The results of these reviews will be presented to NIH Director Dr.

Harold Varmus and the ICD directors this month.

Finally, I'd like to extend a welcome to medical and dental students from across the country who make up the charter class of the new Clinical Research Training Program here at NIH. Patterned after the Howard Hughes Medical Institute-NIH Research Scholars Program, its primary goal is to provide the nation's medical students an NIH venue for exploring clinical research.

The program was suggested last fall by the clinical research panel that advises Dr. Varmus about ways to stimulate interest in clinical research. Nine third-year students joined this first class and most will reside in the newly renovated NIH Director's House. Part of the students' experience will be participation in the fourth generation of the Clinical Center's introductory course in clinical research, which will run October 7, 1997-June 2, 1998.

### disability awareness

October marks the nation's annual observance of Disability Employment Awareness Month.

This year's theme, "Ability—The Bridge to the Future," signifies two basic truths: the need for all employees—including those of us with disabilities—to prepare for the future by investing in ourselves today and the need for employers to focus on the abilities of qualified job applicants with disabilities to meet the increasing need for skilled workers.

Millions of Americans with disabilities were provided a bridge of opportunity with the advent of numerous laws. The Civil Rights Act of 1964, Title V of the Rehabilitation Act of 1973, and the Americans with

Disabilities Act of 1990 established a clear and comprehensive prohibition of discrimination on the basis of disability. But census data shows that as of 1994, 50 percent of working-age individuals with disabilities in this country were not working. Employment is too critical for economic and social independence and for feelings of self-worth for us to be satisfied with the progress we have made thus far.

There is a huge, untapped personnel resource in this country that offers employers the potential to use talents and skills of the most underutilized labor pool — people with disabilities. For persons with disabilities, however, the path to the workplace and a rewarding career is

often restricted. Obstacles to social and economic independence may not come from a lack of capability, skill, or education. Too often, obstacles arise at the critical point when people with disabilities have been prepared for the workplace, but the workplace has not prepared to receive them.

Because the future needs everyone, the CC EEO Office, through the Disability Employment Program Coordinator, can help. Remember, ability is the bridge to the future. Working together, we can ensure that persons with disabilities successfully navigate the bridge.

—Jerry Garmany

Editor's Note: Garmany coordinates the CC Disability Employment Program.



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### Roundtable live from the CC

The first CC Roundtable on Sept. 23 featured a panel of NIH experts discussing "New Strategies for the Diagnosis and Management of Kidney Cancer: Recent Advances in Molecular Genetics." It was broadcast live over the GE TiP-TV Healthcare Network and CenterNet-The Academic Health Center Network. Preparing for the broadcast were (left to right) Dr. Berton Zbar, chief of the Laboratory of Immunobiology, NCI Division of Basic Sciences; Dr. John Gallin, CC director; Dr. Peter Choyke, chief of the uroradiology section, CC Diagnostic Radiology Department; and Dr. W. Marston Linehan, chief of the Urologic Oncology Branch, NCI Division of Clinical Sciences.

### briefs



### Award recipient

Dr. John Doppman (right), acting chief of the Diagnostic Radiology Department, has received the Distinguished Clinical Teacher Award. Presented annually since 1985, the award recognizes excellence in clinical training involving the direct care of patients by any senior clinical investigator at NIH. Dr. John Gallin, CC director, presented the award.

### **Board to meet**

The Clinical Center Board of Governors is set to meet on Oct. 22 in the Medical Board Room. The session is scheduled to begin at 9 a.m.

Director's award ceremony set

CC employees will be recognized for outstanding service during the annual CC Director's Award Ceremony. This year's program will take place at 2 p.m. on Nov. 14 in Masur Auditorium.

### **Rehab Medicine** hosts walk

In honor of Physical Therapy Month, the Rehabilitation Medicine Department will host a one-mile, campus-wide walk on Oct. 21 from 11:30 a.m. to 12:30 p.m.

CC therapists will be on hand to provide information on the benefits of a regular exercise program and will assist participants by monitoring their

pulses and calculating their target heart rates.

### Save your receipts The NIH Children's School will

again this year be collecting receipts from Giant and Safeway food purchases. Receipts, which will benefit the school program here at the CC, can be submitted at the Red Cross desk or sent through NIH mail to Helen Mays, Building 10, Room S235. The program ends Feb. 28. Call 496-2077 for more information.

### **Celebrate Patient Escort Services**

The Outpatient Department will celebrate National Patient Transportation Week Nov. 3-7. Activities include a raffle benefitting the Patient Emergency Fund. Tickets can be purchased outside the special events office from 9 a.m. to 2 p.m. on those days.

# CCMD's work extends beyond CC walls

Staff of the Clinical Center's Critical Care Medicine Department (CCMD) are applying their expertise outside the walls of the Clinical Center.

Recently, staff members have been involved in updating guidelines for treatment of opportunistic infections in HIV-infected patients; developing guidelines for evaluating and treating fever in the intensive-care setting; and organizing the upcoming meeting of the Society for Critical Care Medicine.

Said Dr. Henry Masur, CCMD chief, "The Clinical Center and the NIH are taking an important role in synthesizing NIH-funded research and industry-sponsored research into practice guidelines that both health-care providers and patients can translate into practical day-to-day management."

One such effort is the 1997 revision of USPHS/IDSA Guidelines for the Prevention of Opportunistic Infections in Persons Infected with Human Immunodeficiency Virus. Preventing opportunistic infections (OIs), which take advantage of a weakened immune system, is key to prolonging survival and improving quality of life for HIV-infected patients. A task force co-chaired by Dr. Masur, Dr. Jonathan Kaplan of the Centers for Disease Control and Prevention (CDC), and Dr. King Holmes of the University of Washington, Seattle, and comprising members of NIH, the CDC, and the Infectious Diseases Society of America (IDSA), convened last fall here in Bethesda. The task force reviewed new data concerning the prevention of OIs and determined which recommendations needed to be changed. Their revised guidelines, which were originally published two years ago (see CC News, Aug. 1995), were published in June in Morbidity and Mortality Weekly Report, and will be reprinted in both Annals of Internal Medicine and Clinical Infectious Diseases. A July editorial in the Journal of the American Medical Association by the co-chairs

"It was very important to try to consolidate this information so that it is available quickly and all in one place."

-Masur

drew attention to the guidelines for that journal's diverse audience.

"The 1995 edition was the first time that all the opportunistic pathogens were included in one set of recommendations," said Dr. Masur. "For an individual practitioner to keep up with all this data is almost impossible, even if they make AIDS their full-time occupation. It was very important to try to consolidate this information so that it is available quickly and all in one place."

What's new in the 1997 revision? Recommendations have changed for four main OIs:

- •Pneumocystis carinii pneumonia
- •Mycobacterium avium complex disease
  - •Tuberculosis
- •Streptococcus pneumoniae infection

The guidelines are presented in an easy-reference table format accompanied by full-text rationale for the recommendations. Single copies are available from the National AIDS Clearinghouse, 1-800-458-5231.

Fever management is another area in which CCMD staff have weighed in with their expertise. "The Society of Critical Care Medicine (SCCM) is interested in establishing practice parameters in a variety of areas. One of these is how to evaluate fever in a cost-effective way," said Dr. Masur. Patients in intensive-care often develop fevers, and numerous tests are usually done

to determine its cause. This gets expensive.

Dr. Masur again chaired a group that compiled a report called "Practice Parameters for Initiating a Fever Evaluation in Critically Ill Adult Patients." CCMD senior fellow Dr. Naomi O'Grady was the group's executive secretary and lead author. The group also included former CC clinical specialist Debra Tribett, R.N., and former CCMD fellow Myung Nam, M.D.

The team considered questions such as, What constitutes a fever? How best do we measure fever? What tests are most useful? What are the relative risks of various tests? and How much do they cost? Their report, initiated by SCCM, has been endorsed by the IDSA and the Society of Health Care Epidemiologists and will be published this coming winter in Critical Care Medicine. "This report should establish a consistent and logical approach that intensive-care units can modify to fit their practice situations," said Dr. Masur.

The third recent area of influence by CCMD staff centers on the annual meeting of SCCM. Coming up in February 1998, in San Antonio, the meeting is being organized by Dr. Anthony Suffredini and Dr. Fred Ognibene. "We've worked for at least two years to develop a program that reflects the exciting new developments in the science and clinical practice of critical care medicine," said Dr. Suffredini.

"Our clinical and research experience here at the Clinical Center gives us a broad perspective. We were able to apply that expertise to help revitalize the content of the annual meeting," he said. A heavy emphasis will be placed on interactions between basic science and clinical practice. The program has four tracks:

- pulmonary
- •sepsis/multiorgan failure
- •cellular and molecular biology

See CCMD, next page



More than 250 entries were received in the "Name the Train" contest sponsored by the Combined Federal Campaign group. The winner will be recognized by DHHS Secretary Donna Shalala in an Oct. 1 ceremony. Shown are Al Rexroad (left), deputy coordinator of the CC campaign, and Walter Jones, CC deputy director for management and operations, NIH ICD coordinator for the campaign.

# all aboard the CFC train

(Continued from page one)

"Employees should look at this as an opportunity to share with people who may not be as fortunate as themselves," says Al Rexroad, deputy coordinator of the CC campaign.

This year's campaign provides numerous activities in which employees can participate. A Namethe-Train contest sponsored by the HHS campaign group garnered nearly 250 suggestions from NIH

### . . . CCMD

(Continued from previous page)

 patient care and professional development.

"The topics within each track are timely, and the speakers are experts who can communicate with a diverse audience. In fact, several Clinical Center people are speaking," he said. They include: Dr. Robert Danner, Dr. Peter Eichacker, Dr. Charles Natanson, Dr. Naomi O'Grady, Dr. Henry Masur, Dr. James Shelhamer, and Dr. Alison Wichman. Drs. Suffredini and Ognibene will moderate several sessions.

Dr. Masur sums up: "Critical care is a relatively new subspecialty compared to cardiology, pulmonary medicine, or gastroenterology.

Technology is improving rapidly, and our understanding of the pathophysiology of life-threatening illness has improved dramatically. Clinical Center staff have an opportunity to contribute to advances in basic research and improvements in patient care and to the dissemination of these advances to practitioners at other centers. Taking a leadership role in professional societies in terms of producing practice parameters and organizing national meetings fits into the vision and goals our department has established."

-by Sue Kendall

alone. The employee with the best name for the campaign train will be recognized by DHHS Secretary Donna Shalala Oct. 1.

In addition, names will be drawn weekly for the HHS "Vice Chair's Cookie Raffle," which provides new CFC contributors a batch of cookies of their choice.

The Oct. 16 NIH kickoff event will include an R&W "Chili Cook-Off" with categories including "best," "most original," and "hottest." Participants should bring their chili to the front of Building 1 between 10 and 11:30 a.m., with judging at noon. Hard Times Cafe also will be on hand to sell their own chili.

Other activities include raffles, music compliments of the Federal Focus Jazz Band, and special appearances that will include Dr. Bear, the mascot of Children's National Medical Center.

The Combined Federal Campaign allows employees to chose from over 2500 agencies to voluntarily contribute through payroll deductions.

# Foil the Flu with help from OMS

### Patient Care Schedule

Date	Unit	Time
Oct. 6	12W	7 a.m.
	2J	8 a.m.
	10D	9 a.m.
	13W	10 a.m.
	9W	3 p.m.
	10W	4 p.m.
Oct. 8	7E	7 a.m.
	10W	8 a.m.
	8W	9 a.m.
	7E	3 p.m.
	6W	3:30 p.m.
	9W	4 p.m.
Oct. 10	4W	3 p.m.
	4E	3:30 p.m.
	10D	4 p.m.
	13W	4:30 p.m.

More slots may be added as needed. Check patient-care unit schedules.



The Occupational Medicine Service (OMS) is once again offering flu vaccinations for all CC health-care workers.

The flu, which can be debilitating even for healthy people, is particularly serious if transmitted to the elderly or to patients with certain chronic medical conditions.

Here are some facts about the flu:

•It is very infectious and can be passed from person to person through casual contact, as well as through direct patient care;

•People infected with the flu are contagious before their own flu symptoms develop (usually 2 days before fevers, coughs, and aches begin);

•The Centers for Disease Control and Prevention has predicted that influenza B will be the predominant flu strain this year.

Since it cannot be treated with drugs that are currently available, the only way to avoid it is to prevent it by being vaccinated.

CC staff can "Foil the Flu" by receiving a vaccination during many convenient times and numerous locations throughout the hospital. Special "early-bird" health-care worker vaccinations are available on Oct. 6, 8, and 10. After that time, the OMS clinic will offer walk-in hours during the day, and evening clinics on

specified days. Check the schedule for the site nearest you.

More detailed information about the flu vaccine is available on the CC homepage and in brochures throughout the hospital.

### **OMS Schedule**

First letter	a.m.	p.m.	
NOPQ	Oct. 15	7:30–11	1–3
RS	Oct. 16	7:30–11	1–2
TUV	Oct. 21	7:30–11	1–3
WXYZ	Oct. 23	7:30–11	1–2
AB	Oct. 28	7:30–11	1–3
CD	Oct. 30	7:30–11	1–2
EF	Nov. 4	7:30–11	1–3
GH	Nov. 6	7:30–11	1–2
IJK	Nov. 12	7:30–11	1–3
LM	Nov. 13	7:30–11	1–2
Open	Nov. 20	7:30–11	1–2
Open	Nov. 21	7:30–11	1–3

Open evening clinics will be held Oct. 16–Nov. 20, on Mondays and Thursdays from 4:30 to 8 p.m., on a first-come, first-served basis.

# JCAHO's coming!



In preparation for the Joint Commission visit later this month, the Rehabilitation Medicine Department developed "JCAHO Jeopardy," which quizzed staff members on critical areas such as patient care, human resources, information management and leadership. "We came up with the idea because we realized that a review of the materials for the visit would need to be comprehensive and we felt that this format would make it enjoyable as well as informative," says Bonnie Thornton, chief of the department's occupational therapy section.



Certain building repairs are on the fast track as the Joint Commission visit approaches. Among the jobs being handled by the Division of Engineering Services, NIH Office of Research Services, is replacement of defective sprinkler heads with new and improved ones. George Seale takes care of this play-it-safe job on 11 East. Nate Adams, project officer, oversees replacements.



A mock survey last month included a visit to 13 East. Head nurse Laura Chisholm (left) reviews unit procedures with Joan locono, one of the consultants conducting the practice session.

### october

### 1 Grand Rounds noon-1 p.m. Lipsett Amphitheater

Molecular Genetics, Diagnosis and Treatment of Menkes "Kinky Hair" Disease, Occipital Horn Syndrome, and their Murine Counterparts, Stephen G. Kaler, M.D., NINDS

Post-Exposure Prophylaxis for Occupational Exposure to HIV, David Henderson, M.D., CC

### Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Intracellular Signaling from the Endoplasmic Reticulum to the Nucleus, Peter Walter, Ph.D., University of California, San Francisco

# Medicine for the Public 7 p.m. Masur Auditorium

Vision and Aging, Robert Nussenblatt, M.D., NEI

### ...new office

(Continued from page one)

will focus on creating consistent administrative policies and practices; developing "best practices" and sharing knowledge among AOs; providing training for career growth and technical expertise; implementing new initiatives such as use of credit cards; and ultimately to improve efficiency across the CC.

"Our goal is to provide the administrative support necessary to assist the CC in its long-range goal of cost effectiveness and efficiency," says Gormley.

### 8 Grand Rounds noon-1:30 p.m. Lipsett Amphitheater

Why Study Rare Diseases: Nephropathic Cystinosis as an Example, William Gahl, M.D., Ph.D., NICHD

Molecular Oncology, Edison Liu, M.D., NCI

These rounds are part of the CenterNet broadcasts to medical schools and hospitals across the country.

#### No Wednesday Afternoon Lecture—NIH Research Festival

# 14 Medicine for the Public 7 p.m. Masur Auditorium

Genetics of Lung Disease: Insights into Asthma, Cystic Fibrosis, and Emphysema, Joel Moss, M.D., NHLBI

### 15 Grand Rounds noon-1 p.m. Lipsett Amphitheater

New Therapeutic Approaches for Ocular Inflammation, Scott Whitcup, M.D., NEI

An Update on Advance Directives, Marion Danis, M.D., CC

### Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Structure/Function Studies in MHC/Antigen Recognition and in Viral Entry Mechanisms, Don C. Wiley, Ph.D., Harvard University, Cambridge

# Medicine for the Public 7 p.m. Masur Auditorium

Hormones and Heart Disease After Menopause, Richard Cannon, M.D., NHLBI

### 22 Grand Rounds noon-1 p.m. Lipsett Amphitheater

Immunotoxin Therapy for Solid Tumors, Lee Pai, M.D., NCI

Human Leptin Levels and Endocrine Function, Julio Licinio, M.D., NIMH

# Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

DNA-Mediated Electron Transfer: Chemistry at a Distance, Jacqueline K. Barton, Ph.D., California Institute of Technology, Pasadena

The DeWitt Stetten, Jr. Lecture

# 28 Medicine for the Public 7 p.m. Masur Auditorium

New Perspectives for Bone Marrow Transplants, John Barrett, M.D., NHLBI

# 29 Clinical Staff Conference noon-1 p.m. Lipsett Amphitheater

Identification of the Gene Causing Familial Mediterranean Fever, Daniel Kastner, M.D., NIAMS, Moderator

# Wednesday Afternoon Lecture 3 p.m. Masur Auditorium

Making, Breaking, and Shuffling Protein Disulfide Bonds in vivo, Jonathon Beckwith, Ph.D., Harvard Medical School, Boston